Attorney or Party Name, Address, Telephone & FAX Numbers, and California State Bar Number	FOR COURT USE ONLY			
Attorney for:				
UNITED STATES BANKRUPTCY COURT				
CENTRAL DISTRICT OF CALIFORNIA				
In re:	CHAPTER:			
	CASE NO.:			
Debtor(s).				
DEBTOR'S MOTION TO REOPEN CASE AND FOR EXTE				
CERTIFICATION OF COMPLETION OF POSTPETIT				
CONCERNING PERSONAL FINANCIA	AL MANAGEMEN I			
(For Case Closed Without Entry of Discharge Due to Noncompliand	ce With 11 U.S.C. §§ 727(a)(11) or 1328(g)(1))			
TO THE HONORABLE UNITED STATES BANKRUPTCY JUDGE:				
1. Bankruptcy Case Filing Information:				
a. A voluntary petition under chapter □ 7 □ 13 was filed on:				
 Because the Debtor(s) failed to file Official Form 23, Debtor's Certi Course Concerning Personal Financial Management ("OF 23") wit 				
court closed this case without entering a discharge.	(//			
2. I, , the Debtor in this case, ar	nd, (if joint			
2. I,, the Debtor in this case, and, (if joint debtors) hereby request that the court enter an order: (a) reopening the case pursuant to 11 U.S.C. § 350(b) and F.R.B.P.				
5010; and (b) extending the time for the Debtor(s) to file the OF 23 for a period of 30 days from the date of entry of an order				
granting this motion.				
3. The Debtor(s) failed to file the OF 23 by the original deadline, and therefore need to have the case reopened so that the required OF 23 can be filed and a discharge can be entered because: (Explain circumstances that prevented the Debtor(s)				
from filing the OF 23 in a timely manner.)				
and I declare this under penalty of perjury.				

Revised December 7, 2007

Debtor's Motion to Reopen Case and for Extension of Time To File Debtor's Certification of of Postpetition Instructional Course Concerning Personal Financial Management - Page 2

In re			CHAPTER:
		Debtor(s).	CASE NO.:
WHEREFORE, the Debtor(s) pray(s served) reopening this case and extended			n is submitted herewith and has been or(s) discharge may be entered.
Debtor's Signature	Dated	City	State
Joint Debtor's Signature	Dated	City	State
	PROOF OF SE	ERVICE BY MAIL	
STATE OF CALIFORNIA COUNTY OF			
I am employed in the above County business address is as follows:	r, State of California. I a	am over the age of 18 and	d not a party to the within action. My
AND FOR EXTENSION OF TIME INSTRUCTIONAL COURSE CONCE States Trustee at their last known as	E TO FILE DEBTOR'S RNING PERSONAL FINA ddresses by placing a tr	S CERTIFICATION OF ANCIAL MANAGEMENT of Tue and correct copy there	BTOR'S MOTION TO REOPEN CASE COMPLETION OF POSTPETITION in the chapter trustee and the United eof in a sealed envelope with postage , California, addressed as
I declare under penalty of perjury un	der the laws of the Unite	ed States of America that	the foregoing is true and correct.
Dated:			
Type Name		Signature	

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